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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 10/781,219 |
| | | Filing Date | 2/18/2004 |
| | | First Named Inventor | Backes |
| | | Group Art Unit | |
| | | Examiner Name | Not yet known |
| Total Number of Pages in This Submission | | Attorney Docket Number | 160-027 |

ENCLOSURES (check all that apply)

| | | |
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| Remarks | | Please charge any deficiency or credit any overpayment to Deposit Account No. 502569. |

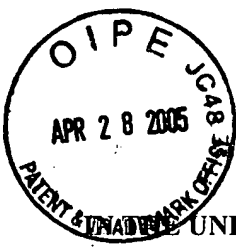
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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| Firm or Individual name | Mary Steubing, Reg. No. 37,946 Steubing McGuinness & Manaras LLP |
| Signature | <i>Mary Steubing</i> |
| Date | 4/26/05 |

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| Type or printed name | Christine M. Morrisette | | |
| Signature | <i>Christine M. Morrisette</i> | Date | 4-26-05 |

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UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Backes

Serial No.: 10/781,219

Filed: 2/18/2004

Title: Apparatus for Self-Adjusting Power at a
Wireless Station to Reduce Inter-Channel
Interference

Attorney Docket No.: 160-027

Group Art Unit:

Examiner:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted before mailing date of first office action on the merits.

Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313.

Date of Deposit: 4-26-05

Typed Name: Christine M. Morrisette

Signature: Christine M. Morrisette

Respectfully submitted,

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Telephone No.: 978-264-6664

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| Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | Complete if Known <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/781,219</td> </tr> <tr> <td>Filing Date</td> <td>2/18/2004</td> </tr> <tr> <td>First Named Inventor</td> <td>Backes</td> </tr> <tr> <td>Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td>Not yet known</td> </tr> <tr> <td>Attorney Docket Number</td> <td>160-027</td> </tr> </table> | | Application Number | 10/781,219 | Filing Date | 2/18/2004 | First Named Inventor | Backes | Art Unit | | Examiner Name | Not yet known | Attorney Docket Number | 160-027 |
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| Art Unit | | | | | | | | | | | | | | | | |
| Examiner Name | Not yet known | | | | | | | | | | | | | | | |
| Attorney Docket Number | 160-027 | | | | | | | | | | | | | | | |
| Sheet | 1 | of | 1 | | | | | | | | | | | | | |

| U.S. PATENT DOCUMENTS | | | | | |
|-----------------------|-----------------------|--|--------------------------------|--|---|
| Examiner Initials* | Cite No. ¹ | Document Number | Publication Date MM-DD-YYYY | Name of Patentee or Applicant of Cited Document | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |
| | | Number - Kind Code ² (if known) | | | |
| | | US-5,963,848 | 10/05/1999 | D'Avello | |
| | | US-5,606,727 | 02/25/1997 | Ueda | |
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| FOREIGN PATENT DOCUMENTS | | | | | | |
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